



U.S. Embassy's Julia Taft Fund

The Julia Taft Fund supports community-based projects that provide sustainable assistance to refugees, internally displaced persons, vulnerable migrants and stateless persons. Each year, the Taft Fund awards grants up to \$25,000 for projects that respond to issues that have not been addressed by larger multilateral refugee programs. Projects that duplicate the work or services provided by the United Nations High Commission for Refugees or other multilateral refugee programs will not be funded. Proposals are due no later than April 30, 2014.

INSTRUCTIONS FOR SUBMITTING A COMPLETED APPLICATION

PROVIDE ORGANIZATION, COMMUNITY and PROJECT DETAILS: Tell us about your organization, its work history, and how this project will benefit your community. Be sure to describe the people who will benefit from your project.

APPLY FOR THE MINIMAL AMOUNT OF FUNDING YOUR PROJECT WILL REQUIRE: **Projects that show the most efficient use of funds are the most likely to receive a grant.** If your project can be accomplished with less money than you are requesting, your application will not be selected for funding.

REMEMBER THAT THIS IS TO BE A COOPERATIVE EFFORT: Your application must include the details of how and in what form your group will contribute to the project (money, materials and/or labor, etc.). **Grants will only be awarded to organizations whose projects involve significant community contribution.**

PROVIDE A BUDGET, A PROJECT TIMELINE, AND, IF YOUR PROPOSAL INVOLVES INCOME GENERATING ACTIVITIES, A BUSINESS PLAN: Please be aware, in most cases the Julia Taft Fund money cannot be used to pay for salaries or perishables (such as food). If you are proposing an income generating project, please fill-out the income generating form on page 4 of the application.

PROVIDE MEASURABLE RESULTS: To qualify for funding, your project must be able to provide measurable results in the forms of people served, income raised, etc.

GATHER SUPPORTING MATERIALS and DOCUMENTATION: Include a copy of your group's registration, pro-forma invoices for all materials listed in your budget, a site map and any letters of support from District officials or other U.S. government partners.

PROVIDE RELIABLE CONTACT INFORMATION: **Include at least one cell number.**

FILL-OUT THE APPLICATION COVERSHEET (see page 4): Every application must include the attached application cover sheet.

THE APPLICATION PROCESS

April 30 is the deadline for submitting an application. All applications submitted after May 1st will be held until the following year. The Embassy will review the applications and submit qualifying applications to the U.S. State Department's Bureau of Population, Refugees and Migration. In July/August, the Bureau of Population, Refugees and Migration will inform the Embassy of their funding decisions and the Embassy will inform the applicants.

NOTE: Project proposals must be submitted by a registered local community group and not by local officials or individuals. Groups must have diverse membership (no single families) and must be already established and operating.



EXAMPLES OF PROJECTS WHICH HAVE RECEIVED FUNDING IN THE PAST:

- Establishment of Legal Aid Clinics
- Job-Training/ Vocational Training
- Establishment of Community Centers
- Human Rights Education
- Environmental Improvement

PLEASE NOTE

- Projects that duplicate the work or services provided by the United Nations High Commission for Refugees or other multilateral refugee programs will not be funded.
- Project proposals must be submitted by a registered local community group and not by local officials or individuals. Groups must have diverse membership (no single families) and must be already established and operating.
- Ongoing administrative or operating costs, such as stipends or rent, may be included in the request, but should only account for a small portion of a comprehensive grant proposal.
- Ambassador's Grants can not be used to pay VAT. **VAT MUST BE PAID BY THE GRANTEE.**
- Proposals Sent to the Julia Taft Fund will not be Returned

SUBMITTING YOUR PROPOSAL

Post or email your completed application to:

Community Grants Coordinator
Ambassador's Fund for HIV/AIDS Relief
United States Embassy
P.O. Box 9123, Dar es Salaam
Telephone: 255-22-229-4602, Fax: 255-22-229-4971, Email: selfhelpd@state.gov

- Applications can be submitted via post or email.
- You can access additional Ambassador's Community Grants information, as well as an on-line copy of the application, at <http://tanzania.usembassy.gov/grants.html>.

For your application to be considered, attach the following documents:

1. A detailed **history** of your organization and project, stating when it started, what has been accomplished, what you have done for the community, and how the community supports your work;
2. Reliable contact information, with at least one cell phone number;
3. A **map** showing how to get to your project from a major road;
4. A Budget and Project Timeline and Pro Forma Invoices for all items to be purchased with Julia Taft Fund money;
5. Copy of project **bank account details**;
6. Proof that the project has its own land (in the name of the project) or permission to occupy the land, e.g., signed **lease agreement** or **deed**;

TAFADHALI: Jihadhari na matapeli (au udanganyifu) Kumekuwa na matukio mengi ya watu kutapeliwa na wajanja wachache wanaodai kuwa wao ni "Wawakilishi wa Ubalozi" wanaoweza kufanikisha maombi ya misaada ubalozini, kwa malipo. Kama una maswali yanayohusu misaada inayotolewa na Ubalozi, tafadhali piga simu Ubalozi wewe mwenyewe, na omba kuongea na Mratibu wa Misaada ya Ubalozi ambaye ni Mmarekani.



Application for U.S. Embassy's Community Grants Program

To apply for an Ambassador's Community grant, submit this six (6) page application form along with the required supporting documentation below:

- Minutes from group meetings which discuss and approve this project with details of plan and request. Please include names of all members present.
- Complete and detailed budget. The budget for the entire project should be detailed with clear indication of the items supported by the group and items requested for support through this grant.
- Pro forma invoices for all major items listed in the budget
- Detailed work plan (i.e. timeline)
- Detailed map to group's office and activity location from nearest large town.
- Copy of groups registration
- Groups organizational chart
- One letter of community support for the proposed project from relevant local official.
- Business plan if the project is an income generating activity. The business plan should demonstrate an understanding of the product or service to be produced, customers to be served and should include a marketing plan.
- Provide a Construction/renovation project plan, if applicable.
- Value Added tax (VAT) exemption Certificate, if applicable.

Date:

Contact Information

Group/Organization Registered Name	
Project Name	
Primary Contact Person	
Land Number	
Cell Number	
Email Address	
Secondary Contact Person	
Cell Number	
Email Address	
Third Contact Person	
Cell Number	
Email Address	
Project Address	
District & Region	
Group Name on Bank Account	
Bank Name and Account Number	



Project Information

GRANT REQUEST (in TSH):

Provide a brief summary of the proposed project. What is the activity the organization is proposing to do with these funds? Please do not provide a background statement here on the community or issues. Describe the activity only:

List the primary steps that must be completed for the project to succeed.

What are the organization's and/or community's contributions to this project? Please be specific and list items and their value.

Why is this project needed? Who will benefit from this project? How will the project benefit your organization, your members, and the community? (please be specific)



Beneficiaries

How many people will **directly** benefit from this proposed project? Direct beneficiaries are the people who will make use of this project. For example, 50 students will use new school desks; 20 group members will use new tailoring machinery.

Women 18 yrs+	
Girls 0-17 yrs	
Total Females	

 +

Men 18 yrs+	
Boys 0-17 yrs	
Total Males	

 =

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How many people will **in-directly** benefit from this project? In-direct beneficiaries are people who will not make use of the project, but will still benefit from the project. For example, if the 20 members who will use new tailoring machinery each have 5 children, 100 people will in-directly benefit from the project.

Women 18 yrs+	
Girls 0-17 yrs	
Total Females	

 +

Men 18 yrs+	
Boys 0-17 yrs	
Total Males	

 =

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Who will manage the grant money and the project (list person(s) and title(s))?

Will another person or organization provide this project with assistance (e.g. financial, administrative or technical)? If yes, please list the person or organization and the nature of their support. Include contact information.

Please describe how the project will be self-sufficient at the end of the self-help funding.



U.S. Embassy grant money cannot be used to pay for Value Added Tax (VAT) on purchases. Is your organization VAT Exempt? If yes, please provide the VAT exemption certificate. If no, can your group afford to pay the VAT on purchased items with other sources of funds? For example, if the group receives a grant of TSH 5,000,000 to purchase carpentry equipment how would they pay the TSH 900,000 in VAT?

Organization Information

In what year was this organization established? _____

Is this organization registered in Tanzania? _____

How many members does your organization have? _____

How many people receive a salary/payment from this organization? _____

Does this organization have a bookkeeper? _____

What is the organization's yearly budget (how much does your group spend in a year)? _____

What is your organizations core work?

Who benefits from your organization's activities (please be specific)?

List the assets and the value of the assets owned by the group (for example, land, equipment, money in bank):

Has this organization received Community Grants Funding from the US Embassy before? If so, please give the name of the project and the year awarded?



How does your organization fund activities and administration costs (Please be specific. For example, if the operating budget comes from private donations than please describe or name the donors)?

List the organization's three main achievements over the past three years (include place and date of accomplishment):

- 1.
- 2.
- 3.

List your organization's main goals for the next three years:

- 1.
- 2.
- 3.

Project Committee

Please list all Project Committee or Group Members working on this project. Include an additional page if necessary.

	Name	Title	Contact Information Cell number or Email address
1			
2			
3			
4			
5			
6			
7			
8			
9			
10			



Community Support

Please include one (1) letter of community support with this application clearly endorsing the proposed project. This letter may come from your Village Executive Officer, District Executive Director, or if relevant to the project, District Education or Health Officers. Please provide information below regarding this letter.

Name of Community Support Person	Office, Title	Contact Information Cell number and Email address

References

Please provide two (2) independent references for your group if available. These references will be able to verify the group's successes and/or the project coordinator's ability to organize and manage this project.

	Name of Reference	Organization	Relationship with Project	Contact Information Cell number and Email address
1				
2				

Applicant Signature

I certify that all information contained in this form is correct to the best of my knowledge.

Print Name, Title	Signature	Date

Your group can access additional information on the Ambassador's Community Grants Program, as well as an on-line copy of the application, at <http://tanzania.usembassy.gov/grants.html>.

Please contact the US Embassy Community Grants Coordinator if your group has any questions. We can be reached at selfhelpd@state.gov.